

Application Information

Application number:: 09/618,380

Filing Date:: 07/18/00

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Humanized Antibodies Against CD3

Attorney Docket Number:: 011823-004920US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 6

Total Drawing Sheets:: 14

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: Yes

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.:: No

Applicant Information

Name Suffix::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: George

Middle Name::

Family Name:: Weiner

City of Residence:: lowa City

State or Province of Residence:: IA

Country of Residence:: US

Street of Mailing Address:: 235 Kennedy Parkway

City of Mailing Address:: lowa City

State or Province of mailing address:: IA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 52246

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Roger

Middle Name::

Family Name:: Gingrich

Name Suffix::

City of Residence:: Iowa City

State or Province of Residence:: IA

Country of Residence:: US

Street of Mailing Address:: 2035 Abby Lane

City of Mailing Address:: lowa City

State or Province of mailing address:: IA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 52246

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Brian

Middle Name:: K.

Family Name:: Link

Name Suffix::

City of Residence:: Coralville

State or Province of Residence:: IA

Country of Residence:: US

Street of Mailing Address:: 325 Knowling Drive

City of Mailing Address:: Coralville

State or Province of mailing address:: IA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 52241

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: J.

Middle Name:: YUN

Family Name:: TSO

Name Suffix::

City of Residence:: Menlo Park

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 445 Oak Grove Avenue

City of Mailing Address:: Menlo Park

Page 3

Initial 3/20/07

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94025

Correspondence Information

Correspondence Customer Number:: 45308

Representative Information

Representative Designation:: Representative Number:: Representative Name::

Primary 37,505 Joe Liebeschuetz

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

09/618,380 Continuation 08/397,411 03/01/1995

Assignee Information

Assignee Name:: PDL BioPharma, Inc.

Street of mailing address:: 34801 CAMPUS DRIVE

City of mailing address:: Fremont

State or Province of mailing address:: California

Country of mailing address:: Santa Clara

Postal or Zip Code of mailing address:: 94555